## REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



Application Number: 10/077,933 Confirmation Number: 7099
Filing Date: February 20, 2002
First Named Inventor: Fujihito NUMANO
Group Art Unit: 2174
Examiner: Thanh T. VU
Attorney Docket Number: 04329.2736
Attorney Customer Number: 22,852

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1.	end	Submission required under 37 C.F.R. § 1.114: Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, application must request non-entry of such amendment.							
	a.	a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.							
		i.	Consider the arguments in the Appeal Brief or Reply Brief previously filed on [Date]						
		ii.		Other					
	b. DO NOT ENTER the amendment(s) previously filed on [Date(s)] . An alternate					An alternate submission is	submission is attached.		
	Ç.	$\boxtimes$	Enclosed submission: .						
		i.	$\boxtimes$	Amendment/Reply	iii.		Information Disclosure	Statement	
		ij.		Affidavit(s)/Declaration(s)	iv.				
2.	Mis	Miscellaneous							
	<b>a.</b>		Suspension of action on the above-mentioned application is requested under 37 C.F.R. § 1.103(c) for a period of [number] months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required.)						
	b.	b. Other							
3. Fees									
	a.	$\boxtimes$	The filing fee is calculated as follows:				27/2005 SZEWDIE1 00000068 10077933		
	•	i.	⊠	\$790.00 RCE fee required under 37	C.F.R. § 1.17(e)	F.R. § 1.17(e) 01 FC:1801 790 02 FC:1201 400			
		ü.						400100 UP	
		äi.	Other 2 Added Independent Claims \$400.00						
	b.								
c.  The Commissioner is authorized to charge any deficiencies in the filing fees, or credit any overpayment to Deposit Account No. 06-0916.									
Signature of Applicant, Attorney, or Agent Required									
Name: Reece Nienstadt					Reg. No.: 52,072				
Signature: PSM. PGS					Date: 4/26/05				
Certificate of Mailing or Transmission									

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, MAIL STOP RCE, P.O. Box 1450, Alexandria, VA. 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on: [Date]

Name: [Text]

Signature:

Date:

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN TYPE -(Column 1) (Column 2) OR SMALL ENTITY TOTAL CLAIMS 25 RATE FEE RATE FEE RASIC EFF 370.00 RASIC FEE 740.00 NUMBER FILED NUMBER EXTRA FOR OR TOTAL CHARGEABLE CLAIMS 90 minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X42± X84= 84 OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 OR TOTAL TOTAL 91V **CLAIMS AS AMENDED - PART II** OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAMS HIGHES' ADDI-ADDI-AMENDMENT A REMAINING NUMBER PRESENT TIONAL RATE RATE TIONAL AFTER PREVIOUSLY **EXTRA PAID FOR** FEE FEE **AMENDMENT** T?T 24 Minus Total X\$ 9= X\$18= OR Minus Independent 28 X37\_ X42= ΩĐ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR 4/26/10 OR ADDIT, FEE ADIC (Column 1) (Column 2) (Column 3) HIGHEST CLAMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE RATE TIONAL AMENDMENT AFTER PREVIOUSLY EXTRA **AMENDMENT PAID FOR** FEE FEE 31 Minus Total X\$ 9≖ X\$18= OR Minus Independent X42= <u> X84-</u> OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL TOTAL OR ADDIT. FEE 500 ADDIT. FEE (Column 2) (Column 1) (Column 3) HIGHEST CLAIMS ADDI-ADDI-O REMAINING NUMBER PRESENT AFTER PREVIOUSLY RATE TIONAL RATE TIONAL **AMENDMENT EXTRA** AMENDMENT PAID FOR FEE FEE Minus Total \*\* X\$ 9= X\$18= OR Minus Independent X42= XB4= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

\* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

+280=

ADDIT. FEE

TOTAL

OR

OR

+140=

ADDIT. FEE

TOTAL

Application or Docket Number

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.